PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

50212-587

CLAIMS AS FILED - PART I								SMALL	ENTITY		OTHE	R THAN
TOTAL OLARIAS			(Column 1)		(Column 2)		, ·	TYPE		OF		ENTITY
TOTAL CLAIMS			10]	RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			//) minus 20= *					X\$ 9=		OR	X\$18=	
IN	DEPENDENT (/ minus 3 = *					X43=		1	Yes		
М	ULTIPLE DEPE	NDENT CLAIM F	RESENT							OR		
*	f the differenc	e in column 1 is	less than zero, enter "0" in column			column 2	' l	+145=		OR	L	
		·		MENDED - PART II				TOTAL		OR	TOTAL	770
. (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL	
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=	1	OR	X86=	
	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM			+145=		1 .	+290=	
							L	TOTAL		OR	TOTAL	
		(Column 1)		(Colum	n 2)	(Column 3)	Α	DDIT. FEE	<u></u>	OR	ADDIT. FEE	
		CLAIMS	1	HIGHE	_				, 			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	,	=		X\$ 9=		OR	X\$18=.	
	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT (CLAIM		-			[_]		
				,			L	+145=		OR	+290=	_ ,
		•						TOTAL		OR .	TOTAL	
	•	10 -1					AL	DDIT. FEE		Д.	DDIT. FEEL	
1	`	(Column 1)	 	(Column		(Column 3)		•				
MEN		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus	###		=		X43=	· .	-	X86=	—-
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	~~~	
* 14	the entry is esti-	nn 1 ie leas thas it				_	1	145=		OR	+290=	
H	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL DDIT. FEE	
T	he *Highest Num	nber Previously Paid ber Previously Paid	io For IN THIS For" (Total or I	SPACE is le Independent	ess than) is the h	3, enter *3.* lighest number i		DIT FEE L in the app	ropriate box			